



Docket No. 826.1617

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Hirohisa Naito, et al.

Serial No.: 09/654,524

Group Art Unit: 2183

Filed: September 1, 2000

For: APPARATUS AND METHOD FOR PRESENTING SCHEDULE
INFORMATION DEPENDING ON SITUATION

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REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

It is requested that the Total Claims on the Official Filing Receipt be corrected. The correct number of Claims is --26--, as is evidenced by the Transmittal attached to the application as filed. For the convenience of the Patent and Trademark Office, attached is a photocopy of the original receipt on which the errors have been noted in red.

It is requested that a corrected Official Filing Receipt be issued in this application.

Respectfully submitted,
STAAS & HALSEY LLP

By: _____

James D. Halsey, Jr.
Registration No. 22,729

700 Eleventh Street, N.W.
Washington, D.C. 20001
(202) 434-1500

Date: _____

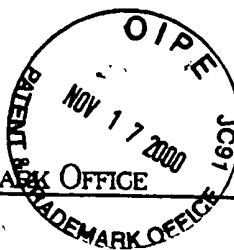
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UNITED STATES PATENT AND TRADEMARK OFFICE



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UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
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09/654,524	09/01/2000	2183	1656	826.1617 (JDH)	18	66 26	14
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21171
STAAS & HALSEY LLP
700 11TH STREET, NW
SUITE 500
WASHINGTON, DC 20001

FILING RECEIPT



OC000000005498807

Date Mailed: 10/24/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

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Applicant(s)

Hirohisa Naito, Kawasaki, JAPAN;
Kuniharu Takayama, Kawasaki, JAPAN;
Minoru Sekiguchi, Kawasaki, JAPAN;
Yoshiharu Maeda, kawasaki, JAPAN;

Continuing Data as Claimed by Applicant

Foreign Applications

JAPAN 11-271916 09/27/1999

If Required, Foreign Filing License Granted 10/23/2000

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Title

Apparatus and method for presenting schedule information depending on situation

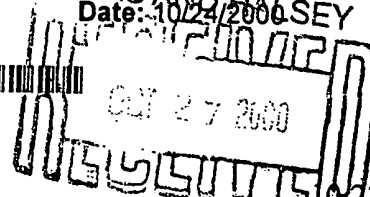
Preliminary Class

712

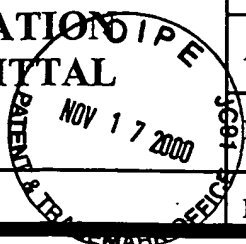
Data entry by : HARDY, EUGENIA

Team : OIPE

STAAS AND HALSEY
Date: 10/24/2000



NEW APPLICATION FEE TRANSMITTAL



Attorney Docket No.	826.1617 (JDH)
Application Number	To be assigned
Filing Date	September 1, 2000
First Named Inventor	Hirohisa NAITO

AMOUNT ENCLOSED

\$

FEE CALCULATION (fees effective 12/29/99)

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS	26 - 20 =	6	X \$ 18.00 =	\$ 108.00
	INDEPENDENT CLAIMS	14 - 3 =	11	X \$ 78.00 =	858.00
	MULTIPLE DEPENDENT CLAIMS (any number; if applicable)			+ \$260.00 =	
	BASIC FILING FEE				690.00
	Total of above Calculations =				\$ 1,656.00
	Surcharge for late filing fee, Statement or Power of Attorney (\$130.00)				+
	Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28).				-
	TOTAL FILING FEE =				\$ 1,656.00
	Surcharge for filing non-English language application (\$130.00; 37 CFR 1.52(d))				+
	Recordation of Assignment (\$40.00; 37 CFR 1.21(h)(1))				40
	TOTAL FEES DUE =				\$ 1,696.00

METHOD OF PAYMENT

- ☒ Check enclosed as payment.
- ☐ Charge "TOTAL FEES DUE" to the Deposit Account No., below.
- ☐ No payment is enclosed and no charges to the Deposit Account are authorized at this time.

GENERAL AUTHORIZATION

- ☒ If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to:

Deposit Account No.

19-3935

Deposit Account Name

STAAS & HALSEY LLP

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- ☒ The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application.

SUBMITTED BY: STAAS & HALSEY LLP

Typed Name	James D. Halsey, Jr.	Reg. No.	22,729
Signature		Date	September 1, 2000



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WASHINGTON, D.C. 20231
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Bib Data Sheet

SERIAL NUMBER 09/654,524	FILING DATE 09/01/2000 RULE -	CLASS 712	GROUP ART UNIT 2183	ATTORNEY DOCKET NO. 826.1617 (JDH)
APPLICANTS Hirohisa Naito, Kawasaki, JAPAN; Kuniharu Takayama, Kawasaki, JAPAN; Minoru Sekiguchi, Kawasaki, JAPAN; Yoshiharu Maeda, kawasaki, JAPAN; ** CONTINUING DATA ***** NONE RB ** FOREIGN APPLICATIONS ***** RB JAPAN 11-271916/09/27/1999				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/23/2000				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>[Signature]</i> RB Examiner's Signature Initials		STATE OR COUNTRY JAPAN	SHEETS DRAWING 18	TOTAL CLAIMS 66 INDEPENDENT CLAIMS 14
ADDRESS 21171				
TITLE Apparatus and method for presenting schedule information depending on situation				
FILING FEE RECEIVED 1656	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	